

PROGRAMME UPDATE



International Federation of Red Cross and Red Crescent Societies
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

MOZAMBIQUE

30 November 2004

The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 181 countries. For more information: www.ifrc.org

In Brief

Appeal No. 01.15/2004; Programme Update no.2; Period covered: July to November 2004;
Appeal coverage: 33.0%; Outstanding needs: CHF 1,421,647 (USD 1,184,200 or EUR 929,500).
[Click here to go directly to the attached Contributions List, also available on the website.](#)

Appeal target: CHF 2,121,801 (USD 1,593,452 or EUR 1,365,820)

Related Emergency or Annual Appeals: Mozambique 2005 Annual Appeal no. 05AA012 –
http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/05AA012.pdf

Programme summary: The Mozambique Red Cross Society¹ has been implementing its five-year strategic HIV/AIDS plan since 2002, in nine provinces. The programme covers; prevention through peer youth education; care and support for people living with HIV/AIDS (PLWHA) and orphans and other vulnerable children (OVC) and advocacy for the rights of PLWHA and OVC. During the reporting period, the HIV/AIDS programme received financial support from the Federation, from the British, Danish, German, Netherlands, Norwegian and Spanish Red Cross Societies, Save the Children Fund and National AIDS Council, and received technical support from the Ministry of Health (MoH).

The regional delegation allocated funds to Mozambique Red Cross to support the establishment of community-based disaster preparedness (CBDP) initiatives in the Manica province. The regional senior disaster management officer also visited the national society to familiarize with the programme.

For further information please contact:

- In Mozambique: Fernanda Teixeira, Secretary General, Email fernanda.teixeira@redcross.org.mz; Phone 258 1 497 72, 258 1 490 943; cell 258 82 31 16 25 Fax 258 1 497 725
- In Zimbabwe: Françoise Le Goff, Federation Head of Southern Africa Regional Delegation, Harare; Email ifrczw02@ifrc.org; Phone 263.4.70.61.55 or 263.4.70.61.56; Fax 263.4.70.87.84
- In Geneva: Terry Carney, Federation Regional Officer for Southern Africa, Africa Dept.; Email terry.carney@ifrc.org; Phone 41.22.730.42.98; Fax 41.22.733.03.95

This Programme Update reflects activities to be implemented over a one-year period. This forms part of, and is based on, longer-term, multi-year planning (refer below to access the detailed logframe documents).

All International Federation assistance seeks to adhere to the Code of Conduct and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response in delivering assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <http://www.ifrc.org>

¹ Mozambique Red Cross Society – <http://www.ifrc.org/where/country/check.asp?countryid=120>

Operational developments

Mozambique, like many other African countries, suffers from a high prevalence of poverty-related diseases. The main health problems are; malaria, HIV/AIDS, tuberculosis, cholera and other diarrhoeal diseases, and a high rate of malnutrition among children. Furthermore, the access to health facilities is poor. Malaria is the biggest cause of death. The poorest populations are most at risk and the disease often strikes children (one in every four dies before the age of five), women who lose their acquired immunity to malaria during pregnancy and people who lack any immunity to the disease, such as displaced persons and migrants.

In the past two years participatory approaches have been shown to be effective in programme planning and implementation. Improvement in monitoring and evaluation of impact is still required and this will be a focus in 2005. Federation support will be targeted at eight districts in Sofala, Tete, Gaza and Maputo City province. In addition to Federation assistance the health and care programme is supported by numerous partner national societies bilaterally and UNICEF. The Federation regional HIV/AIDS support team provides technical support to the national society project in monitoring, support visits and training.

The national society coordinates its water and sanitation activities with other agencies through participation in monthly national/ local sectoral coordination meetings. Its partners at the implementation level are the local government agencies involved in health and care, UNICEF and Oxfam. Food security has been increased through provision of seeds and tools to the most vulnerable communities. Support for development of poultry projects and training families in vegetable growing has been received in provinces with home-based care (HBC). In some areas Mozambique Red Cross is distributing food with WFP support.

The national society has made strides in capacity building through training of staff and volunteers in various disaster management modules, including empowering communities in disaster preparedness. The national society trained volunteers and disseminated early warning systems for tropical cyclones. Mozambique Red Cross has been able to respond to disasters effectively and emergency stocks have been replenished and pre-positioned in disaster prone areas. The national society has established three community-based disaster preparedness (CBDP) projects in Inhambane, Zambezia and Sofala province, in collaboration with the National Institute for Disaster Management (INGC) and other institutions.

Mozambique Red Cross has also prioritised the strengthening of its local, district and provincial branches. Databases have been established on volunteers, district and provincial commissions. The regional branch development manual has been translated, improved and adapted to the Mozambican context. Governance and management training for district committees was conducted in six provinces. Since 2003 internal elections have taken place in all 11 provinces and 97 districts. The general assembly and national elections will be held early 2005.

The national society is updating its finance software and intends to extend its use to the provincial branches. The internal financial control systems are now in place and the follow-up of the global audit findings has been undertaken.

Health and care

Goal: The lives and the general health conditions of vulnerable communities in Mozambique are improved.

Health and Care: HIV/AIDS

Objective: The spread of HIV/AIDS is reduced and the quality of the life of PLWHA, especially orphans, is improved or at least maintained in the districts where Mozambique Red Cross carries out HIV/AIDS programme activities

Progress and Achievements

Community home-based care (CHBC) provided to PLWHA and their families, including the OVC.

CHBC activities were carried out in the following areas: In Maputo City province (in Catembe and Urban District 4); in Maputo province (in Ressano Garcia and Moamba); in Gaza Province (in Xai- Xai, Chokwe, Manjacaze, Bilene, Chibuto and Guijá); in Manica province (in Sussundenga, Mossurize, Machaze, Chimoio, Manica and Gondola); in Tete province (in Changara and Chiúta); in Nampula Province (in Meconta and Nacala); in Zambézia province (in Morrumbala). During the home visits, the care facilitators provided information on personal and environmental hygiene to HBC clients and their families. During this period, 106 care facilitators from all provinces received training and refresher training on HBC.

Approximately 1,400 people affected and infected by HIV/AIDS benefited from CHBC programme through over 3,000 home visits. A total of 537 HBC clients received counselling and 76 have been referred to health facilities and voluntary counselling and testing (VCT) centres.

During the reporting period HBC clients received support on medical supplies and/or hygiene materials and 903 OVC received nutritional support. In Maputo City, 70 clients received seeds, agricultural tools and training in development of vegetable gardens. Another 30 clients in Maputo City and ten in Tete received support in poultry. A group of 30 provincial and district coordinators, care facilitators and clients of the CHBC received training on support groups.

HIV/AIDS preventive skills provided to target communities.

Prevention activities for in and out of school youths were carried out in Tete, Nampula, Maputo City, Maputo, Sofala, Zambézia, Cabo Delgado, Inhambane and Manica provinces. The activities included public talks, theatre, video watching, games, debates, music and dance.

Training and refresher courses on HIV/AIDS prevention were carried out in several provinces. A total of 126 prevention volunteers have been trained and/or received a refresher training (including a group of 26 commercial sex workers in Ressano Garcia and Moamba). A total of 34 community leaders have been trained on issues related with the rights of PLWHA, stigma and discrimination. A total of 40 leaders have been trained on gender issues related with HIV/AIDS and another 23 on community support to OVC.

Approximately 134,000 people have been reached through the prevention activities and 104,970 condoms distributed. Over 1,000 information, education and communication (IEC) materials (leaflets) have been distributed.

Impact

The development of vegetable gardens, poultry projects and also the food support are contributing to the improvement of health for HBC clients and their families. The involvement of community leaders in the HIV/AIDS activities is a positive indicator of the acceptance and relevance of the HBC project.

The prevention activities are contributing to the increase in knowledge on HIV/AIDS among the target groups. Other indicators of the effectiveness of prevention activities are the requests being received from several NGO's for the development of prevention activities in places such as work and churches.

Mozambique; Annual Appeal no.01.15/2004; Programme Update no. 2

Constraints

The collection of accurate data from the provinces is still of concern. Training of trainers for the HIV/AIDS technicians at provincial and district level on programme implementation, including data collection is recommended.

Health and Care: Water and Sanitation

Objective: Establishment of sound, sustainable environmental services for vulnerable population (27,500) in Nampula province by 2005 in water supply, sanitation and hygiene promotion

There are water and sanitation projects in seven districts in Nampula province. Additional districts in the province have been added to the project since the previous programme update as some boreholes fitted with handpumps in some districts had already been rehabilitated by another agency. The project districts are areas in which Mozambique Red Cross implements other health and care and disaster preparedness activities. The water supply, sanitation and hygiene promotion project coordinates with these other interventions. The project will rehabilitate all the non-functional handpumps fitted on boreholes in these districts. The operational budget was written for an income of CHF 219,000 whereas the Appeal budget was for CHF 272,000. The number of beneficiaries of the project has reduced from approximately 27,500 in the appeal to 23,000. The actual 2004 income at the date of this report is CHF 185,000 from British Red Cross and Finnish Red Cross, with the remaining CHF 34,000 being income carried over from 2003. Regional support has been given on procurement and in the development of a strategy for 2005.

Progress and Achievements

Hygiene promotion/sanitation promotion volunteers effectively cover target population of 27,500 by year 2005

A total of 52 hygiene promotion volunteers have been recruited and trained. The hygiene promoters have received bicycles and PHAST kits to enable them to carry out hygiene promotions activities. These volunteers are now working in the project areas promoting hygiene and have identified households to benefit from the sanitary platforms (SanPlat) distribution. The hygiene promoters through household visits and community meetings have covered approximately half of the total 23,000 expected beneficiaries.

Distribution of 600 SanPlats to households who build adequate traditional latrines by 2005

A total of 28 SanPlats have been distributed to families who have constructed a traditional latrine. SanPlats are purchased by the Red Cross from a private company in Nampula town. The production of SanPlats was delayed due to a shortage of cement in Nampula due to the temporary closure of the local cement factory. The production of the SanPlats by this company is sustainable. The SanPlats will be distributed in three districts.

52 viable, fully functioning and adequate community managed water supplies in low-income villages by 2005 (52 handpumps rehabilitations)

The project manager, after detailed assessment, now plans to rehabilitate 46 handpumps fitted on boreholes. It was found that some handpumps in the original assessment had been rehabilitated by other agencies. A total of 13 handpumps have been rehabilitated, benefiting approximately 6,500 people. In addition 13 water supply, sanitation and hygiene education committees pump mechanics have been given on the job training during these rehabilitations.

52 community-based operation and maintenance and cost recovery systems established and functioning by 2005

A total of 13 community management water supply team trainings were conducted in Nampula province 52 people received training.

Increased resources for water/sanitation and hygiene promotion projects, and contribution to sector policies, best practices, coordination and cooperation by 2005

Mozambique; Annual Appeal no.01.15/2004; Programme Update no. 2

The income for the project is in line with the appeal budget. Income received is slightly higher than the income of 2003. The project manager has been active in the Nampula rural water supply coordination meetings. The national water and sanitation coordinator has participated in national sector forum.

Impact

Better access to safe water and sanitation not only leads to improvement in health, but also saves time and energy and enhances livelihood opportunities. Approximately 6,500 people in 13 villages now have access to safe water within a reasonable distance from their homes and with a capacity to ensure 15 litres of water per day per person.

Constraints

Delays in implementation have been due to; a lack of cement in Nampula, delays in transfer of cash from the headquarters to Nampula; and in procurement of equipment. Mozambique Red Cross is looking into improving these processes.

Disaster Management

Goal: The vulnerability of the populations living in disaster-prone areas is reduced.

Objective: The vulnerability of the communities in disaster-prone areas in all provinces is reduced and their capacity to respond to disasters strengthened.

Progress and Achievements

Knowledge and skills of Mozambique Red Cross officers and volunteers in disaster management increased

The national society conducted three regional planning workshops in the northern (Nampula), central (Manica) and southern regions (Inhambane). Participants include six disaster management officers from Nampula, Manica and Inhambane provinces, five from other provinces and eleven provincial secretaries. Regional disaster response team (RDRT) refresher training was held in Zambia in September and three disaster management provincial officers attended.

In Maputo Province 25 volunteers were trained in community-based disaster preparedness CDBP in Moamba district, including two community leaders and three members of the district commission. Training of trainers courses on the curriculum of CDBP were conducted in Maganja da Costa district for 20 volunteers. A water rescue simulation was held in the same district and ten Red Cross volunteers participated.

The CDBP has been rolled out nationally aiming at reducing the levels of vulnerability in disaster-prone areas such as to Maputo City, Manica and Nampula province. Funds were allocated for needs assessment in the districts of Catembe (communities of Chali and Guachene), Sussundenga (Community of Dombe) and Angoche (Community of Aúbe).

Assistance provided to the population during presidential elections

Mozambique Red Cross provided assistance during the intercalary elections held in May in the Municipality of Xai Xai, Gaza province. With funding from ICRC six staff and 64 volunteers were positioned in 26 voting posts to manage emergencies and first aid. There was full participation of all disaster preparedness officers and volunteers at national level during the elections. An emergency response training workshop attended by 24 participants was held aimed at equipping participants to cascade the information to other officers and volunteers in preparation of intervention during the forthcoming general election to be held in December 2004.

Coordination with public entities working in the area of disaster management strengthened, particularly with the national institute for disaster management (INGC)

There is effective participation in various coordination meetings, both at headquarters and provincial levels with INGC, German Organization for Technical Cooperation, and other national and international governmental and non-governmental organizations operating in the country.

Mozambique; Annual Appeal no.01.15/2004; Programme Update no. 2

Mozambique Red Cross effective response capacity strengthened through consolidation of local structures for prompt and adequate response to disasters

Disaster management officers and volunteers participated at the inauguration ceremony of Vilanculos District Commission and the celebrations of the Red Cross Day in Inhambane province.

The national society provided incentives to volunteers in Maputo province locality of Pessene and Moamba Sede (bar of soap, six plates and cups for each volunteer) and in the districts of Mopeia, Maganja da Costa and Namacurra (cooking oil, soap and tooth paste). Spare parts for the maintenance of bicycles distributed to volunteer were procured. A boat was pre-positioning in Maganja da Costa district ready for response to emergency situations/flooding.

Impact

The regional planning workshops provided a forum for the elaboration of realistic narrative activity plans and budgets for the 11 provincial branches. The disaster management officers are now implementing the activities in line with the plan.

Constraints

The disaster management programme encounters financial constraints, that is, lack of funding in provinces without specific funding for the development of disaster management activities. The feasibility study for drought and food security has not yet been completed in Maputo province and this could affect the accomplishment of scheduled activities within the programme.

[Contributions list below; click here to return to the title page and contact information.](#)

APPEAL No. 01.15/2004

PLEDGES RECEIVED

01/12/2004

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
-------	----------	----------	------	-----------	------	---------

CASH

					TOTAL COVERAGE	
REQUESTED IN APPEAL CHF ----->				2,121,801		33.0%
CASH CARRIED FORWARD				42,124		
BRITISH - RC		70,000	GBP	165,165	09.03.04	WATER SANITATION
BRITISH - RC		5,000	GBP	11,430	27.10.04	WATER SANITATION
DANISH - RC		5,325	USD	6,733	02.07.04	PREPARATION WORKSHOP
FINNISH - RC		118,000	EUR	185,909	18.03.04	COMMUNITY BASED HEALTH
FINNISH - RC		15,000	EUR	23,393	17.05.04	WATSAN PROGRAMME
FINNISH - RC		25,000	EUR	38,988	17.05.04	ORGANISATIONAL DEVELOPMENT
FINNISH - RC		30,000	EUR	46,575	15.10.04	WATSAN PROGRAMME
FINNISH - RC		60,000	EUR	93,150	15.10.04	COMMUNITY BASED HEALTH
SINGAPORE RC		910	SGD	687	21.06.04	
SUB/TOTAL RECEIVED IN CASH				614,154	CHF	28.9%

KIND AND SERVICES (INCLUDING PERSONNEL)

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
DENMARK	DELEGATES			46,000		
NORWAY	DELEGATES			40,000		
Note: due to systems upgrades in process, contributions in kind and services may be incomplete.						
SUB/TOTAL RECEIVED IN KIND/SERVICES				86,000	CHF	4.1%

ADDITIONAL TO APPEAL BUDGET

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED				0	CHF	